

Combined Form for Patent Application and Declaration of Attorney

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name:

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled
TUMOR NECROSIS FACTOR (TNF) INHIBITORY PROTEIN AND ITS PURIFICATION

_____ the specification of which

(check one) ☐ is attached hereto.
☒ was filed on September 12, 1988
 U.S. or PCT Application Serial No. 243,092
 and was amended on _____
 (if applicable)

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose information which is material to the examination of this application in accordance with Title 37, Code of Federal Regulations, § 1.56(a).

I hereby claim foreign priority benefits under Title 35, United States Code, § 119 of any foreign application(s) for patent or inventor's certificate listed below and have also identified below any foreign application for patent or inventor's certificate having filing date before that of the application on which priority is claimed:

Prior Foreign Application(s)			Priority Claimed	
83878	Israel	September 13, 1987	<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO
(Number)	(Country)	(Day Month Year Filed)		
	(Country)	(Day Month Year Filed)	<input type="checkbox"/> YES	<input type="checkbox"/> NO
(Number)	(Country)	(Day Month Year Filed)	<input type="checkbox"/> YES	<input type="checkbox"/> NO
(Number)	(Country)	(Day Month Year Filed)	<input type="checkbox"/> YES	<input type="checkbox"/> NO

I hereby claim the benefit under Title 35, United States Code, § 120 of any United States Application(s) listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States application in the manner provided by the first paragraph of Title 35, United States Code, § 112, I acknowledge the duty to disclose material information as defined in Title 37, Code of Federal Regulations, § 1.56(a) which occurred between the filing date of the prior application and the national or PCT international filing date of this application:

(Application Serial No.)	(Filing Date)	(Status) (patented, pending, abandoned)

I hereby appoint the following attorneys, with full power of substitution, association, and revocation, to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith.

ALVIN BROWDY, Reg. No. 16260	SHERIDAN NEIMARK, Reg. No. 20520
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I hereby further declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

FULL NAME OF SOLE OR FIRST INVENTOR		INVENTOR'S SIGNATURE		DATE
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RESIDENCE		CITIZENSHIP		
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RESIDENCE		CITIZENSHIP		
POST OFFICE ADDRESS				
FULL NAME OF SEVENTH JOINT INVENTOR, IF ANY		INVENTOR'S SIGNATURE		DATE
RESIDENCE		CITIZENSHIP		
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FULL NAME OF EIGHTH JOINT INVENTOR, IF ANY		INVENTOR'S SIGNATURE		DATE
RESIDENCE		CITIZENSHIP		
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FULL NAME OF NINTH JOINT INVENTOR, IF ANY		INVENTOR'S SIGNATURE		DATE
RESIDENCE		CITIZENSHIP		
POST OFFICE ADDRESS				
FULL NAME OF TENTH JOINT INVENTOR, IF ANY		INVENTOR'S SIGNATURE		DATE
RESIDENCE		CITIZENSHIP		
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FULL NAME OF ELEVENTH JOINT INVENTOR, IF ANY		INVENTOR'S SIGNATURE		DATE
RESIDENCE		CITIZENSHIP		
POST OFFICE ADDRESS				
FULL NAME OF TWELFTH JOINT INVENTOR, IF ANY		INVENTOR'S SIGNATURE		DATE
RESIDENCE		CITIZENSHIP		
POST OFFICE ADDRESS				
FULL NAME OF THIRTEENTH JOINT INVENTOR, IF ANY		INVENTOR'S SIGNATURE		DATE
RESIDENCE		CITIZENSHIP		
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FULL NAME OF FOURTEENTH JOINT INVENTOR, IF ANY		INVENTOR'S SIGNATURE		DATE
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